

Mississippi Department of Mental Health

Provider Bulletin Number PR0103

Supporting a Better Tomorrow...One Person at a Time

Subject: Medicaid Flexibilities under Appendix K for ID/DD Waiver and State Plan IDD Community Support Program Ending June 30, 2021 **Issue Date**: May 17, 2021

Effective Date: Immediately

Scope

All IDD Service Providers

Purpose

To inform providers of flexibilities due to COVID under the Appendix K for ID/DD Waiver and State Plan IDD Community Support Program will end June 30, 2021

Subject

The Mississippi Division of Medicaid has informed the Department of Mental Health that flexibilities approved under the Appendix K for the ID/DD Waiver and State Plan for IDD Community Support Program will end June 30, 2021.

Flexibilities ending June 30, 2021 include:

- Day Services-Adult and Prevocational services may temporarily be provided in DMH approved settings (Supervised Living, Supported Living, Shared Supported Living, or the individual's home) which are included in the Statewide Transition Plan.
- Allow flexibility on expiring state issued identification, training, background checks, at DOM's
 discretion throughout the pandemic. Flexibilities include temporarily waiving/delaying requirements on
 state issued ID. Training for CPR, first aid, and other trainings may be conducted online. To ensure
 ongoing quality of care and safety, new provider staff will be required to have a name only background
 check with results that does not preclude them from providing care in accordance with state law. These
 flexibilities apply to all ID/DD Waiver providers and services.
- Allow authority to complete the level of care evaluations or recertifications through the pandemic telephonically where appropriate in accordance with HIPAA requirements.
- Allow any face-to-face/home visits including quarterly plan reviews to be completed telephonically, if
 needed, in accordance with HIPAA requirements. Support Coordinators will still be required to
 complete monthly contacts with participants/caregivers by phone to ensure services are received as
 authorized.
- Allow for any follow up related to critical incident reports to be completed telephonically, as needed, in accordance with HIPAA requirements.
- Allow for annual compliance reviews by DOM and DMH to be extended/suspended, if needed, during the pandemic and not to extend past the end date of this Appendix K amendment. DMH conducts certification reviews of providers annually. These reviews include reviews of services, program locations, adherence to an accepted Plan of Compliance, DMH Operational Standards, guidelines, contracts, staffing plans, staff training, etc. DOM conducts post payment reviews of providers annually. These reviews include review of claims data, that staff providing claimed services are qualified, that

- services were provided to eligible individuals, and that those services were provided in accordance with the frequencies, amounts, and duration on the approved Plan of Services and Supports.
- Day Services-Adult and Prevocational services, when provided telephonically or virtually, is covered up to three (3) hours per day per service and will be reimbursed at the lowest support level.
- Day Services-Adult and Prevocational services to be provided telephonically or virtually where appropriate in accordance with HIPAA requirements.
- HCBS Regulations: Not comply with the HCBS settings requirement at 42 CFR 441.301(c)(4)(vi)(D) that individuals are able to have visitors of their choosing at any time, for settings added after March 17, 2014, to minimize the spread of infection during the COVID-19 pandemic.
- Services: Add an electronic method of service delivery (e.g., telephonic) allowing services to continue to be provided remotely in the home setting for: Case management, Monthly monitoring (i.e., in order to meet the reasonable indication of need for services requirement in 1915(c) waivers), Other [Describe]: Day Services-Adult and Prevocational services to be provided telephonically or virtually where appropriate in accordance with HIPAA requirements.
- Conflict of Interest: Current safeguards authorized in the approved waiver will apply to these entities
- Processes: Allow an extension for reassessments and reevaluations for up to one year past the due date, Allow the option to conduct evaluations, assessments, and person-centered service planning meetings virtually/remotely in lieu of face-to-face meetings, Adjust assessment requirements, Add an electronic method of signing off on required documents such as the person centered service plan.
- To extend the effective date of all flexibilities outlined in previously approved Appendix K's to six (6) months following the expiration of the public health emergency

If you have questions, contact Betty Pinion, Director of ID/DD Waiver at betty.pinion@dmh.ms.gov or call (601)359-5797 or Deborah Etzold, Director of IDD Community Support Program at deborah.etzold@dmh.ms.gov or call (601)359-5777.

End of Provider Bulletin